

**United States Bankruptcy Court
Northern District of Illinois**
Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Stiles, Donald L.		Name of Joint Debtor (Spouse) (Last, First, Middle): Stiles, Kimberly S.	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): None	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 3839		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 6674	
Street Address of Debtor (No. and Street, City, and State) 1016 South Fifth Street DeKalb, IL		Street Address of Joint Debtor (No. and Street, City, and State) 1016 South Fifth Street DeKalb, IL	
		ZIPCODE 60115	ZIPCODE 60115
County of Residence or of the Principal Place of Business: DeKalb		County of Residence or of the Principal Place of Business: DeKalb	
Mailing Address of Debtor (if different from street address): ZIPCODE		Mailing Address of Joint Debtor (if different from street address): ZIPCODE	
Location of Principal Assets of Business Debtor (if different from street address above): ZIPCODE			
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.	
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).		
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000			
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion			
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion			

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Document	Page 2 of 63 Name of Debtor(s): Donald L. Stiles & Kimberly S. Stiles
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)		
Location Where Filed: NONE	Case Number:	Date Filed:
Location Where Filed: N.A.	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: NONE	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A		Exhibit B <i>(To be completed if debtor is an individual whose debts are primarily consumer debts)</i>
<p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p>X <u>/s/ Brian K. Wright</u> Signature of Attorney for Debtor(s) _____ Date _____</p>
Exhibit C		
<p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>		
Exhibit D		
<p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p>		
Information Regarding the Debtor - Venue <i>(Check any applicable box)</i>		
<p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>		
Certification by a Debtor Who Resides as a Tenant of Residential Property <i>(Check all applicable boxes)</i>		
<p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p style="text-align: center;">(Name of landlord that obtained judgment)</p> <p style="text-align: center;">(Address of landlord)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).</p>		

B1 (Official Form 1) (04/13)		Document	Page 3 of 63	Page 3
Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Donald L. Stiles & Kimberly S. Stiles		
Signatures				
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.		Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) <input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached. <input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X _____ (Signature of Foreign Representative) (Printed Name of Foreign Representative) (Date)		
X /s/ Donald L. Stiles _____ Signature of Debtor				
X /s/ Kimberly S. Stiles _____ Signature of Joint Debtor				
Telephone Number (If not represented by attorney)				
Date				
Signature of Attorney* X /s/ Brian K. Wright _____ Signature of Attorney for Debtor(s)		Signature of Non-Attorney Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer		
BRIAN K. WRIGHT 6304330 _____ Printed Name of Attorney for Debtor(s)				
Brian Wright & Associates, P.C. _____ Firm Name				
437 West State Street _____ Address				
Suite 101Sycamore, IL 60178 _____ 815-895-2074 bw@wrightandassociateslaw.com Telephone Number e-mail				
Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.				
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.		Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address X _____ _____ _____		
X _____ _____ Signature of Authorized Individual				
_____ _____ Printed Name of Authorized Individual				
_____ _____ Title of Authorized Individual				
_____ _____ Date				
<i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</i>				

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In re Donald L. Stiles & Kimberly S. Stiles
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: _____ /s/ Donald L. Stiles
DONALD L. STILES

Date: _____

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In re Donald L. Stiles & Kimberly S. Stiles
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Joint Debtor: _____ /s/ Kimberly S. Stiles
KIMBERLY S. STILES

Date: _____

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank.

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Homestead Real Estate 1016 South Fifth Street DeKalb, IL 60115	Tenancy by the Entirety	J	117,978	Exceeds Value
		Total >	117,978	

(Report also on Summary of Schedules.)

In re Donald L. Stiles & Kimberly S. Stiles

Debtor

Case No.

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		US Currency Debtors' Person	J	20
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account American Midwest Bank 1985 DeKalb Avenue Sycamore, IL 60178	J	100
		Checking Account American Midwest Bank 1985 DeKalb Avenue Sycamore, IL 60178	W	200
		Savings Account American Midwest Bank 1986 DeKalb Avenue Sycamore, IL 60178	W	550
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		2 couches, 3 recliners, glider, 3 tables & chairs, 4 beds, 4 night stands, 8 dressers, 3 desks & chairs, 3 coffee tables, 6 shelving units, 2 curio cabinets, buffet, smoking stand, 3 tv stands, make-up table & chair Debtors' Residence	J	1,600

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		2 tvs, computer, tablet, 2 nooks, stereo, stove, refrigerator, freezer, washer, dryer, stereo, 2 sewing machine Debtors' Residence	J	1,400
6. Wearing apparel.	X	Hand Tools Debtors' Residence	J	500
7. Furs and jewelry.		30 books, 30 records, 30 cds, 50 dvds, 30 vcr tapes, 20 cassettes Debtors' Residence	J	168
8. Firearms and sports, photographic, and other hobby equipment.		Wedding Rings Debtors' Residence	J	100
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		2 cameras Debtors' Residence	J	25
10. Annuities. Itemize and name each issuer.	X	Life Insurance Policy Conseco Life Insurance Company 11815 N. Pennsylvania Street Carmel, IN 46032	W	175
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X	Retirement Account	W	4,208
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.				

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X	Nationwide Retirement Solutions P.O.Box 182797 Columbus, OH 43218-2797		
14. Interests in partnerships or joint ventures. Itemize.	X	Retirement Account IMRF 2211 York Road, Suite 500 Oak Brook, IL 60523-2337	W	36,239
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No.

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

0 continuation sheets attached Total

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Donald L. Stiles & Kimberly S. Stiles

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2) Check if debtor claims a homestead exemption that exceeds \$155,675*.
 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Homestead Real Estate	735 I.L.C.S 5§12-901 735 I.L.C.S 5§12-901	15,000 15,000	117,978
2006 Ford Freestyle Wagon	735 I.L.C.S 5§12-1001(c)	2,400	3,025
2003 Pontiac Grand Am	735 I.L.C.S 5§12-1001(c)	1,825	1,825
Checking Account	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	50 50	100
Checking Account	735 I.L.C.S 5§12-1001(b)	200	200
Life Insurance Policy	735 I.L.C.S 5§12-1001(b)	175	175
Retirement Account	735 I.L.C.S 5§12-1006	4,208	4,208
Retirement Account	735 I.L.C.S 5§12-1006	36,239	36,239
Savings Account	735 I.L.C.S 5§12-1001(b)	550	550
US Currency	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	10 10	20
2 couches, 3 recliners, glider, 3 tables & chairs, 4 beds, 4 night stands, 8 dressers, 3 desks & chairs, 3 coffee tables, 6 shelving units, 2 curio cabinets, buffet, smoking stand, 3 tv stands, make-up table & chair	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	800 800	1,600
2 tvs, computer, tablet, 2 nooks, stereo, stove, refrigerator, freezer, washer, dryer, stereo, 2 sewing machine	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	700 700	1,400
2 cameras	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	13 12	25

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT
(Continuation Page)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
30 books, 30 records, 30 cds, 50 dvds, 30 vcr tapes, 20 cassettes	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	84 84	168
Wedding Rings	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	50 50	100
1997 Cadillac Seville	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	250 250	500
Hand Tools	735 I.L.C.S 5§12-1001(b) 735 I.L.C.S 5§12-1001(b)	250 250	500
	Total exemptions claimed:	80,010	

B6D (Official Form 6D) (12/07)

In re Donald L. Stiles & Kimberly S. Stiles,
DebtorCase No. _____
(If known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							
JP Morgan Chase Mortgage P.O.Box 24696 Columbus, OH 43224-0696	J	Lien: 1st Mortgage Security: Homestead Real Estate				151,638	33,660
		VALUE \$ 117,978					
ACCOUNT NO.							
National Bank & Trust Company 230 West State Street Sycamore, IL 60178	W	Lien: PMSI in vehicle < 910 days Security: 2007 Huundai Elantra				6,221	2,071
		VALUE \$ 4,150					
ACCOUNT NO.							
		VALUE \$					

0 continuation sheets attached

Subtotal ➤ (Total of this page)	\$ 157,859	\$ 35,731
Total ➤ (Use only on last page)	\$ 157,859	\$ 35,731

(Report also on
Summary of Schedules) (If applicable, report
Summary of Certain
Liabilities and Related
Data.)

B6E (Official Form 6E) (04/13)

In re Donald L. Stiles & Kimberly S. Stiles,
Debtor

Case No. _____
(if known) _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/13) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No. _____
(if known)

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re Donald L. Stiles & Kimberly S. Stiles,
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						
A-TEC Ambulance, Inc. 340 Commerce Drive Crystal Lake, IL 60014	J	Consideration: Medical services				100
ACCOUNT NO.						
American Dream Home Improvement 3040 South Finley Road Downers Grove, IL 60515	W	Consideration: Work Contracted				Notice Only
ACCOUNT NO.						
American Midwest Bank 124 S Main Street Sycamore, IL 60178	H					Notice Only
ACCOUNT NO.						
Asset Recovery Solutions 2200 East Devon Avenue Suite 200 Des Plaines, IL 60018-4501	W	Consideration: Collection Agent for Bureaus Investment Group				Notice Only
Subtotal ➤						\$ 100
Total ➤						\$

12 continuation sheets attached

Subtotal ➤ \$ 100

Total ➤ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO. Multiple Accounts		H	Consideration: Credit card debt			4,531
Barclays Bank Delaware / Juniper P.O. Box 8803 Wilmington, DE 19899						
ACCOUNT NO.			Consideration: Collection Agent for Capital One Bank & Barclays Bank			Notice Only
Blitt & Gaines 661 Glenn Avenue Wheeling, IL 60090						
ACCOUNT NO.			Consideration: Collection Agent for Chase Bank			Notice Only
Brachfeld Law Group P.O.Box 421008 Houston, TX 77242-1088						
ACCOUNT NO.			Consideration: Credit card debt			7,872
Capital One 15000 Capital One Drive Richmond, VA 23238		W				
ACCOUNT NO.		H				Notice Only
Capital One 26525 N Riverwoods Blvd Mettawa, IL 60045						
Sheet no. 1 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal >	\$ 12,403	
				Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO. Multiple Accounts					
Capital One Po Box 30253 Salt Lake City, UT 84130	W				Notice Only
ACCOUNT NO. Multiple Accounts					
Chase Card 201 North Walnut Street //de1-1027 Wilmington, DE 19801	W	Consideration: Credit card debt			1,126
ACCOUNT NO.					
City of DeKalb P.O.Box 787 DeKalb, IL 60115	H	Consideration: Utility Service			223
ACCOUNT NO.					
Client Services 3451 Harry S. Truman Boulevard St. Charles, MO 63301-4047	W	Consideration: Collection Agent for Synchrony Bank / JCPenney			Notice Only
ACCOUNT NO.					
Collection Professionals, Inc. 723 First Street LaSalle, IL 61301-2535	J	Consideration: Collection Agent for Kishwaukee Dental Associates			Notice Only
Sheet no. 2 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤	\$ 1,349	
			Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO.		Consideration: Utility Service			
Comcast Corporation Customer Service 1500 Market Street Philadelphia, PA 19102	W				456
ACCOUNT NO. Multiple Accounts					
Comenity Bank Lane Bryant & Woman Within 4590 E Broad Street Columbus, OH 43213	W				Notice Only
ACCOUNT NO.		Consideration: Utility Service			
Commonwealth Edison 3 Lincoln Center Attn: Bkey Group-Claims Dept. Oakbrook Terrace, IL 60181	W				282
ACCOUNT NO.		Consideration: Medical services			
Conventions Psychiatry 1560 Wall Street, #304 Naperville, IL 60563	J				50
ACCOUNT NO.		Consideration: Collection Agent for HSBC Bank			
Credit Control LLC 5757 Phantom Drive Suite 330 Hazelwood, MO 63042	H				Notice Only
Sheet no. 3 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >	\$	788
			Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO. Multiple Accounts	H	Consideration: Collection Agent for Presence Mercy Center			
Creditors Collection Bureau PO Box 3097 Bloomington, IL 61702					Notice Only
ACCOUNT NO.	J	Consideration: School Fees			
CUSD #428 901 South Fourth Street DeKalb, IL 60115					1,148
ACCOUNT NO.	J	Consideration: Medical services			
DeKalb Clinic Chartered 1850 Gateway Drive Sycamore, IL 60178					414
ACCOUNT NO. 15SC178	W	Consideration: Attorney for TD Bank			
Diane T. Nauer 33 North Dearborn Street Suite 1301 Chicago, IL 60602					Notice Only
ACCOUNT NO.	W	Consideration: Credit card debt			
Direct Merchants Bank P.O.Box 30258 Salt Lake City, UT 84130-0258					5,143
Sheet no. 4 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤	\$ 6,705	
			Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO. Forster & Garbus 60 Motor Parkway Commack, NY 11725		W	Consideration: Collection Agent for TD Bank			Notice Only
ACCOUNT NO. Frederick J. Hanna 1427 Roswell Road Marietta, GA 30062			Consideration: Collection Agent for Chase Bank			Notice Only
ACCOUNT NO. G.E. Money Bank Attn: Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076	H		Consideration: Credit card debt			1,830
ACCOUNT NO. Global Credit Collections P.O.Box 129 Linden, MI 48451		W	Consideration: Collection Agent for JC Penney			Notice Only
ACCOUNT NO. Multiple Accounts H & R Accounts Inc 7017 John Deere Pkwy Moline, IL 61265		J	Consideration: Collection Agent for DeKalb Clinic Chartered & Kishwaukee Community Hospital			Notice Only
Sheet no. 5 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal >	\$ 1,830	
				Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO.			Consideration: Credit card debt			
HSBC Card Services Inc. ATTN: Exception Dept 1301 E. Tower Road Schaumburg, IL 60173	H					3,543
ACCOUNT NO.			Consideration: Legal services			
Jeffrey M. Krasner 407 West State Street Sycamore, IL 60178						Notice Only
ACCOUNT NO.			Consideration: Medical services			
Kishwaukee Community Hospital P. O. Box 846 DeKalb, IL 60115	J					350
ACCOUNT NO.			Consideration: Medical services			
Kishwaukee Dental Associates 8 Health Services Drive DeKalb, IL 60115	J					1,092
ACCOUNT NO.			Consideration: Medical services			
Kishwaukee Health Child Development 760 Foxpointe Drive Sycamore, IL 60178	J					50
Sheet no. 6 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal >	\$ 5,035	
				Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO.	J	Consideration: Medical services			
Lab & Pathology Diagnostics 801 S Washington Street Naperville, IL 60540	J				50
ACCOUNT NO.	J	Consideration: Medical services			
Linden Oaks Hospital 801 S. Washington Naperville, IL 60540	J				375
ACCOUNT NO.	H	Consideration: Credit card debt			
Lowe's Consumer Credit Card PO Box 530914, Atlanta, GA 30353-0914	H				2,099
ACCOUNT NO. Multiple Accounts	H	Consideration: Collection Agent for GE Money Bank, Washington Mutual & HSBC Bank			
LVNV Funding LLC PO Box 10497 Greenville, SC 29603	H				Notice Only
ACCOUNT NO.	H	Consideration: Collection Agent for GE Money Bank / Lowes			
Meyers & Njus 1100 US Bank PLaza 1100 South Sixth Street Minneapolis,MN 55402	H				Notice Only
Sheet no. 7 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >	\$ 2,524	
			Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO.		Consideration: Collection Agent for Chase Bank			
MRS Associates 1930 Olney Avenue Cherry Hill, NJ 08003	W				Notice Only
ACCOUNT NO.		Consideration: Medical services			
Naperville Psychiatric Ventures DBA Edward Hospital 852 West Street Naperville, IL 60540	J				50
ACCOUNT NO.					
National Bank & Trust Company 230 West State Street Sycamore, IL 60178	H				Notice Only
ACCOUNT NO.		Consideration: Collection Agent for Barclays Bank			
National Enterprise Systems 29125 Solon Road Solon, OH 44139-3442					Notice Only
ACCOUNT NO.		Consideration: Student Loans			
Navient PO Box 9500 Wilkes Barre, PA 18773	W				43,056
Sheet no. 8 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤	\$ 43,106	
			Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO.		Consideration: Utility Service			
NICOR Bankruptcy & Collections P. O. Box 549 Aurora, IL 60507	W				603
ACCOUNT NO.		Consideration: Personal loan			
Personal Finance Company 1624 DeKalb Avenue Sycamore, IL 60178	W				1,360
ACCOUNT NO.		Consideration: Medical services			
Presence Mercy Center 1325 N Highland Avenue Aurora, IL 60506	J				1,025
ACCOUNT NO.		Consideration: Medical services			
Provena Mercy Behavioral Health 1330 North Lake Street Aurora, IL 60506	J				1,025
ACCOUNT NO.		Consideration: Medical services			
Reddy Medical Associates 626 Bethany Road DeKalb, IL 60115	J				50
Sheet no. 9 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤	\$ 4,063	
			Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
			DISPUTED		
ACCOUNT NO. Multiple Accounts		Consideration: Collection Agent for Reproductive Genetics Institute			
Regional Recovery Service 5250 South Homan Ave Hammond, IN 46320	W				Notice Only
ACCOUNT NO.		Consideration: Medical services			
Reproductive Genetics Institute 2825 North Halsted Street Chicago, IL 60657	J				2,200
ACCOUNT NO.		Consideration: Medical services			
Ridge Ambulance Service 1106 South 4th Street DeKalb, IL 60115	J				100
ACCOUNT NO.					
Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	H				Notice Only
ACCOUNT NO. Multiple Accounts					
SLM Financial Corporation 11100 USA Parkway Fishers, IN 46037	J				Notice Only
Sheet no. 10 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal ➤	\$ 2,300	
			Total ➤	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO.					
Stoneleigh Recovery Associates P.O.Box 1479 Lombard, IL 60148	W	Consideration: Collection Agent for Discover Financial Services			Notice Only
ACCOUNT NO. Multiple Accounts					
Synchrony Bank / JCPenney PO Box 965007 Orlando, FL 32896	W	Consideration: Credit card debt			1,189
ACCOUNT NO.					
Synchrony Bank / Lowes 4125 Windward Plaza Alpharetta, GA 30005	H				Notice Only
ACCOUNT NO.					
Synchrony Bank / Walmart PO Box 965024 El Paso, TX 79998	W	Consideration: Credit card debt			740
ACCOUNT NO.					
TD Bank USA / Target Credit PO Box 673 Minneapolis, MN 55440	W	Consideration: Credit card debt			1,257
Sheet no. 11 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >	\$	3,186
			Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Donald L. Stiles & Kimberly S. Stiles
DebtorCase No. _____
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED		
ACCOUNT NO.						
The Bureaus Inc 1717 Central Street Evanston, IL 60201	W		Consideration: Collection Agent for Capital One Bank			Notice Only
ACCOUNT NO. 15SC223						
Tim Conklin Foster & Buick 2040 Aberdeen Court Sycamore, IL 60178	W		Consideration: Attorney for Personal Finance Company			Notice Only
ACCOUNT NO.						
United Collection Bureau 5620 Southwyck Boulevard Suite 206 Toledo, OH 43614	H		Consideration: Collection Agent for Linden Oaks			Notice Only
ACCOUNT NO.						
Verizon Wireless Customer Service Department 777 Big Timber Road Elgin, IL 60123	W		Consideration: Cellular Service			601
ACCOUNT NO.						
Washington Mutual Bank c/o Chase Card Services P.O. Box 15298 Wilmington, DE 19850-5298	H		Consideration: Credit card debt			8,870
Sheet no. 12 of 12 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal ➤	\$ 9,471	
				Total ➤	\$ 92,860	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

In re Donald L. Stiles & Kimberly S. Stiles

Case No.

Debtor

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No.

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1 Donald L. Stiles
 First Name Middle Name Last Name
 Kimberly S. Stiles
 (Spouse, if filing) First Name Middle Name Last Name
 United States Bankruptcy Court for the: Northern District of IL
 Case number (If known)

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form B 6l

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Retired	Telecommunicator
Employer's name	DeKalb County Sheriff	
Employer's address	150 North Main Street	
	Number Street	Number Street
	Sycamore, IL 60178	
	City State ZIP Code	City State ZIP Code
How long employed there?	8.5 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3.

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$ 0	\$ 6,484
3. + \$ 0	+ \$ 0
4. \$ 0	\$ 6,484

Donald L. Stiles

Debtor 1

First Name _____ Middle Name _____ Last Name _____

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→ 4. \$ <u>0</u>	\$ <u>6,484</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>232</u>	\$ <u>1,318</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0</u>	\$ <u>486</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0</u>	\$ <u>35</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0</u>	\$ <u>0</u>
5e. Insurance	5e. \$ <u>0</u>	\$ <u>16</u>
5f. Domestic support obligations	5f. \$ <u>0</u>	\$ <u>0</u>
5g. Union dues	5g. \$ <u>0</u>	\$ <u>42</u>
5h. Other deductions. Specify: ; YMCA	5h. +\$ <u>0</u>	+ \$ <u>52</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ <u>232</u>	\$ <u>1,949</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u>-232</u>	\$ <u>4,535</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm	8a. \$ <u>0</u>	\$ <u>0</u>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. \$ <u>0</u>	\$ <u>0</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. \$ <u>0</u>	\$ <u>0</u>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. \$ <u>0</u>	\$ <u>0</u>
8e. Social Security	8e. \$ <u>1,565</u>	\$ <u>1,317</u>
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	\$ <u>0</u>	\$ <u>0</u>
Specify: ;	8f.	
8g. Pension or retirement income	8g. \$ <u>277</u>	\$ <u>0</u>
8h. Other monthly income. Specify: ;	8h. +\$ <u>0</u>	+\$ <u>0</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ <u>1,842</u>	\$ <u>1,317</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>1,610</u>	+ \$ <u>5,852</u> = \$ <u>7,462</u>
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: ;	11. + \$ <u>0</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <u>7,462</u>	
	Combined monthly income	
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: When oldest child turns 18 her SS payments of \$439 a month will cease. Overtime has been reduced.		

Fill in this information to identify your case:

Debtor 1	Donald L. Stiles	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Kimberly S. Stiles	
	First Name	Middle Name
United States Bankruptcy Court for the:	Northern	District of IL
Case number (if known)		

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:
 MM / DD / YYYY
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Daughter

Dependent's age

17 years

Does dependent live with you?

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

Son

15 years

Daughter

15 years

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses	
4.	\$ 1,288
4a.	\$ 0
4b.	\$ 0
4c.	\$ 200
4d.	\$ 0

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Debtor 1 Donald L. Stiles
 First Name Middle Name Last Name

Case number (if known) _____

5. Additional mortgage payments for your residence, such as home equity loans

Your expenses	
5.	\$ 0

6. Utilities:

- 6a. Electricity, heat, natural gas
- 6b. Water, sewer, garbage collection
- 6c. Telephone, cell phone, Internet, satellite, and cable services
- 6d. Other. Specify: _____

6a.	\$ 450
6b.	\$ 120
6c.	\$ 550
6d.	\$ 0

7. Food and housekeeping supplies

7.	\$ 900
----	--------

8. Childcare and children's education costs

8.	\$ 225
----	--------

9. Clothing, laundry, and dry cleaning

9.	\$ 300
----	--------

10. Personal care products and services

10.	\$ 150
-----	--------

11. Medical and dental expenses

11.	\$ 500
-----	--------

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

12.	\$ 800
-----	--------

13. Entertainment, clubs, recreation, newspapers, magazines, and books

13.	\$ 200
-----	--------

14. Charitable contributions and religious donations

14.	\$ 0
-----	------

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a.	\$ 0
15b.	\$ 322
15c.	\$ 450
15d.	\$ 0

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____

16.	\$ 0
-----	------

17. Installment or lease payments:

- 17a. Car payments for Vehicle 1
- 17b. Car payments for Vehicle 2
- 17c. Other. Specify: Student Loan
- 17d. Other. Specify: _____

17a.	\$ 255
17b.	\$ 0
17c.	\$ 275
17d.	\$ 0

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).

18.	\$ 0
-----	------

19. Other payments you make to support others who do not live with you.

Specify: _____

19.	\$ 0
-----	------

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

- 20a. Mortgages on other property
- 20b. Real estate taxes
- 20c. Property, homeowner's, or renter's insurance
- 20d. Maintenance, repair, and upkeep expenses
- 20e. Homeowner's association or condominium dues

20a.	\$ 0
20b.	\$ 0
20c.	\$ 0
20d.	\$ 0
20e.	\$ 0

Debtor 1 Donald L. Stiles
First Name Middle Name Last Name

Case number (if known) _____

21. Other. Specify: _____ 21. +\$ 0

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ 6,985

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 7,462

23b. Copy your monthly expenses from line 22 above.

23b. -\$ 6,985

23c. Subtract your monthly expenses from your monthly income.

23c. \$ 477

The result is your *monthly net income*.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court
Northern District of Illinois

Donald L. Stiles & Kimberly S. Stiles

In re

Debtor

Case No.

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 117,978		
B - Personal Property	YES	4	\$ 54,785		
C - Property Claimed as exempt	YES	2			
D - Creditors Holding Secured Claims	YES	1		\$ 157,859	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0	
F - Creditors Holding Unsecured Nonpriority Claims	YES	13		\$ 92,860	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 7,462
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 6,985
TOTAL		30	\$ 172,763	\$ 250,719	

United States Bankruptcy Court
Northern District of Illinois

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No. _____
Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0
Student Loan Obligations (from Schedule F)	\$ 43,056
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0
TOTAL	\$ 43,056

State the Following:

Average Income (from Schedule I, Line 12)	\$ 7,462
Average Expenses (from Schedule J, Line 22)	\$ 6,985
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$ 7,737

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 35,731
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0
4. Total from Schedule F		\$ 92,860
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 128,591

B6 (Official Form 6 - Declaration) (12/07)

Donald L. Stiles & Kimberly S. Stiles

In re _____ Case No. _____
Debtor (If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 32 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: /s/ Donald L. Stiles
Debtor

Date _____

Signature: /s/ Kimberly S. Stiles
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X _____

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In Re Donald L. Stiles & Kimberly S. Stiles

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

AMOUNT	SOURCE
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2015(db)

2014(db)

2013(db)

2015(jdb) 19,038.38 DeKalb County Government
Sycamore, IL 60178

2014(jdb) 71,993.00 DeKalb County Government, Sycamore, IL
60178
Sycamore Park Dist., Sycamore, IL 60178

AMOUNT	SOURCE (if more than one)
2013(jdb) 66,996.00	66,371.16: DeKalb County Government, Sycamore, IL 624.97: Sycamore Park District, Sycamore, IL

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
2014 (db) 21,743.00	3,276.00: Pension 18,467.00: Social Security
2013(db) 21,431.00	3,228.00: Pension 18,203.00: Social Security

None **3. Payments to creditors**
 Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
National Bank & Trust Company 230 West State Street Sycamore, IL 60178	Regular Monthly Payments	655.49	6,221.00
JP Morgan Chase Mortgage P.O.Box 24696 Columbus, OH 43224-0696	Regular Monthly Payments	3,867.48	151,638.00
Navient PO Box 9500 Wilkes Barre, PA 18773	Regular Monthly Payments	801.00	43,056.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
TD Bank USA v. Kimberly Stiles #15 SC 178	Small Claims Action	DeKalb County Circuit Court Sycamore, IL 60178	Pending
Personal Finance Company v. Kimberly Stiles 15 SC 223	Small Claims Action	DeKalb County Circuit Court Sycamore, IL 60178	Pending

- None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

- None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and Receiverships

- None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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- None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Brian K. Wright Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178	3/17/15	400.00
Brian K. Wright Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178	3/27/15	300.00
Brian K. Wright Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178	4/24/15	\$380.00

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Access Counseling, Inc. 633 W 5th Street Suite 26001 Los Angeles, CA 90071	4/22/15	\$9.00

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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- b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

- None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN) COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME _____ ADDRESS _____

[Questions 19 - 25 are not applicable to this case]

* * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date _____

Signature
of Debtor

/s/ Donald L. Stiles

DONALD L. STILES

Date _____

**Signature
of Joint Debtor**

/s/ Kimberly S. Stiles
KIMBERLY S. STILES

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

Donald L. Stiles & Kimberly S. Stiles

In re _____, Case No. _____
Debtor Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
Creditor's Name: JP Morgan Chase Mortgage P.O.Box 24696 Columbus, OH 43224-0696	Describe Property Securing Debt: Homestead Real Estate
Property will be (<i>check one</i>): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (<i>check at least one</i>): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).	
Property is (<i>check one</i>): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 2 (<i>if necessary</i>)	
Creditor's Name: National Bank & Trust Company 230 West State Street Sycamore, IL 60178	Describe Property Securing Debt: 2007 Hyundai Elantra
Property will be (<i>check one</i>): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (<i>check at least one</i>): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).	
Property is (<i>check one</i>): <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (*All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.*)

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 (<i>if necessary</i>)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 (<i>if necessary</i>)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)): <input type="checkbox"/> YES <input type="checkbox"/> NO

1 continuation sheets attached (*if any*)

I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.

Date: _____

/s/ Donald L. Stiles

Signature of Debtor

/s/ Kimberly S. Stiles

Signature of Joint Debtor

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION
(Continuation Sheet)

PART A - Continuation

Property No: 3	
Creditor's Name: Ford Motor Credit Po Box Box 542000 Omaha, NE 68154	Describe Property Securing Debt: 2006 Ford Freestyle Wagon
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>retain, keep current</u> _____ (for example, avoid lien using 11 U.S.C. §522(f)).	
Property is <i>(check one)</i> : <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

B 201B (Form 201B) (12/09)

United States Bankruptcy Court
Northern District of Illinois

In re Donald L. Stiles & Kimberly S. Stiles
Debtor

Case No. _____
(If known)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer or officer,
Principal, responsible person, or partner whose Social
Security number is provided above.

Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Donald L. Stiles & Kimberly S. Stiles
Printed Names(s) of Debtor(s)

X /s/ Donald L. Stiles
Signature of Debtor

Date

Case No. (if known) _____

X /s/ Kimberly S. Stiles
Signature of Joint Debtor, (if any)

Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

A-TEC Ambulance, Inc.
340 Commerce Drive
Crystal Lake, IL 60014

American Dream Home Improvement
3040 South Finley Road
Downers Grove, IL 60515

American Midwest Bank
124 S Main Street
Sycamore, IL 60178

Asset Recovery Solutions
2200 East Devon Avenue
Suite 200
Des Plaines, IL 60018-4501

Barclays Bank Delaware / Juniper
P.O. Box 8803
Wilmington, DE 19899

Blitt & Gaines
661 Glenn Avenue
Wheeling, IL 60090

Brachfeld Law Group
P.O.Box 421008
Houston, TX 77242-1088

Capital One
15000 Capital One Drive
Richmond, VA 23238

Capital One
26525 N Riverwoods Blvd
Mettawa, IL 60045

Capital One
Po Box 30253
Salt Lake City, UT 84130

Chase Card
201 North Walnut Street //de1-1027
Wilmington, DE 19801

City of DeKalb
P.O.Box 787
DeKalb, IL 60115

Client Services
3451 Harry S. Truman Boulevard
St. Charles, MO 63301-4047

Collection Professionals, Inc.
723 First Street
LaSalle, IL 61301-2535

Comcast Corporation
Customer Service
1500 Market Street
Philadelphia, PA 19102

Comenity Bank
Lane Bryant & Woman Within
4590 E Broad Street
Columbus, OH 43213

Commonwealth Edison
3 Lincoln Center
Attn: Bkcy Group-Claims Dept.
Oakbrook Terrace, IL 60181

Conventions Psychiatry
1560 Wall Street, #304
Naperville, IL 60563

Credit Control LLC
5757 Phantom Drive
Suite 330
Hazelwood, MO 63042

Creditors Collection Bureau
PO Box 3097
Bloomington, IL 61702

CUSD #428
901 South Fourth Street
DeKalb, IL 60115

DeKalb Clinic Chartered
1850 Gateway Drive
Sycamore, IL 60178

Diane T. Nauer
33 North Dearborn Street
Suite 1301
Chicago, IL 60602

Direct Merchants Bank
P.O.Box 30258
Salt Lake City, UT 84130-0258

Forster & Garbus
60 Motor Parkway
Commack, NY 11725

Frederick J. Hanna
1427 Roswell Road
Marietta, GA 30062

G.E. Money Bank
Attn: Bankruptcy Dept.
P. O. Box 103104
Roswell, GA 30076

Global Credit Collections
P.O.Box 129
Linden, MI 48451

H & R Accounts Inc
7017 John Deere Pkwy
Moline, IL 61265

HSBC Card Services Inc.
ATTN: Exception Dept
1301 E. Tower Road
Schaumburg, IL 60173

Jeffrey M. Krasner
407 West State Street
Sycamore, IL 60178

JP Morgan Chase Mortgage
P.O.Box 24696
Columbus, OH 43224-0696

Kishwaukee Community Hospital
P. O. Box 846
DeKalb, IL 60115

Kishwaukee Dental Associates
8 Health Services Drive
DeKalb, IL 60115

Kishwaukee Health Child Development
760 Foxpointe Drive
Sycamore, IL 60178

Lab & Pathology Diagnostics
801 S Washington Street
Naperville, IL 60540

Linden Oaks Hospital
801 S. Washington
Naperville, IL 60540

Lowe's Consumer Credit Card
PO Box 530914,
Atlanta, GA 30353-0914

LVNV Funding LLC
PO Box 10497
Greenville, SC 29603

Meyers & Njus
1100 US Bank Plaza
1100 South Sixth Street
Minneapolis, MN 55402

MRS Associates
1930 Olney Avenue
Cherry Hill, NJ 08003

Naperville Psychiatric Ventures
DBA Edward Hospital
852 West Street
Naperville, IL 60540

National Bank & Trust Company
230 West State Street
Sycamore, IL 60178

National Bank & Trust Company
230 West State Street
Sycamore, IL 60178

National Enterprise Systems
29125 Solon Road
Solon, OH 44139-3442

Navient
PO Box 9500
Wilkes Barre, PA 18773

NICOR
Bankruptcy & Collections
P. O. Box 549
Aurora, IL 60507

Personal Finance Company
1624 DeKalb Avenue
Sycamore, IL 60178

Presence Mercy Center
1325 N Highland Avenue
Aurora, IL 60506

Provena Mercy Behavioral Health
1330 North Lake Street
Aurora, IL 60506

Reddy Medical Associates
626 Bethany Road
DeKalb, IL 60115

Regional Recovery Service
5250 South Homan Ave
Hammond, IN 46320

Reproductive Genetics Institute
2825 North Halsted Street
Chicago, IL 60657

Ridge Ambulance Service
1106 South 4th Street
DeKalb, IL 60115

Rockford Mercantile
2502 S Alpine Rd
Rockford, IL 61108

SLM Financial Corporation
11100 USA Parkway
Fishers, IN 46037

Stoneleigh Recovery Associates
P.O.Box 1479
Lombard, IL 60148

Synchrony Bank / JCPenney
PO Box 965007
Orlando, FL 32896

Synchrony Bank / Lowes
4125 Windward Plaza
Alpharetta, GA 30005

Synchrony Bank / Walmart
PO Box 965024
El Paso, TX 79998

TD Bank USA / Target Credit
PO Box 673
Minneapolis, MN 55440

The Bureaus Inc
1717 Central Street
Evanston, IL 60201

Tim Conklin
Foster & Buick
2040 Aberdeen Court
Sycamore, IL 60178

United Collection Bureau
5620 Southwyck Boulevard
Suite 206
Toledo, OH 43614

Verizon Wireless
Customer Service Department
777 Big Timber Road
Elgin, IL 60123

Washington Mutual Bank
c/o Chase Card Services
P.O. Box 15298
Wilmington, DE 19850-5298

United States Bankruptcy Court
Northern District of Illinois

In re Donald L. Stiles & Kimberly S. Stiles

Case No. _____

Chapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 1,080
Prior to the filing of this statement I have received \$ 1,080
Balance Due \$ 0

2. The source of compensation paid to me was:

Debtor Other (specify) _____

3. The source of compensation to be paid to me is:

Debtor Other (specify) _____

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

/s/ Brian K. Wright

Date

Signature of Attorney

Brian Wright & Associates, P.C.

Name of law firm